

**REQUEST FOR SHIPMENT OF PRIVATELY OWNED VEHICLE (POV)
THROUGH CONUS ALTERNATE PORT**

SECTION I *(To be completed by member)*

1. DATE OF REQUEST (YYYYMMDD)	2. THRU <i>(Origin ITO)</i>	3. TO MECOBO <i>(See DoD Reg. 4500.32-R, Vol. I, App. D for address)</i>
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4. REQUEST AUTHORITY TO SHIP MY POV THROUGH _____
(Alternate Port)

VEHICLE CAN BE DELIVERED TO PORT ON _____, **FOR SHIPMENT TO** _____
*(Date - YYYYMMDD)**(Destination)*

REQUEST DELIVERY DATE OVERSEAS IS _____
(YYYYMMDD)

5. VEHICLE

a. MAKE	b. STATE	c. LICENSE NUMBER	d. BODY TYPE	e. YEAR
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6. I ACKNOWLEDGE THAT COSTS INCURRED BY SELECTION OF AN ALTERNATIVE PORT WHICH EXCEED THE REGULAR ROUTING COSTS WILL BE CHARGED TO ME.

a. NAME OF MEMBER <i>(Last, First, Middle Initial)</i>		b. ADDRESS <i>(Include ZIP Code)</i>
c. GRADE	d. TELEPHONE <i>(Include Area Code)</i>	e. SIGNATURE

SECTION II *(To be completed by approving authority)*

7. PERMISSION *(X)*

<input type="checkbox"/> GRANTED	<input type="checkbox"/> NOT GRANTED
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8. REASON(S) NOT GRANTED

9. MECOBO APPROVING AUTHORITY

10. SIGNATURE	11. DATE (YYYYMMDD)
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